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Substitute for form 1449/PTO						Complete if Known					
					9	Application Number	10/611,496				
	IN	FORM	ATIO	N D	SCLOSURE	Filing Date	06/30/2003				
					APPLICANT	First Named Inventor	Pfister				
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		1030	as many s	1100LS a.	nocessary)	Examiner Name	Robert H. Spitzer				
_	Sheet	1		of	1	Attorney Docket Number	SUNM-P012	$\overline{}$			

Examiner	Cita	Document Number	D. Allerties Date	DOCUMENTS	
Initials*	Cite No.1	Number-Kind Code ² (Fknown)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevan Figures Appear
RHS		^{US-} 5,972,077	10/26/1999	Judkins et al.	
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Q:	Polos III Cilar	Date		
-	Kobert H. Spitzer	Considered	November 23	2001
EXAMINER:	Initial if reference considered whether and itself		Marenay 23	,2004

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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Kind of document by Translation is attached.

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